

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

CLAIMS

AS FILED

**AFTER FIRST
AMENDMENT**

**AFTER SECOND
AMENDMENT**

* May be used for additional claims or amendments

		AMENDMENT		AMENDMENT		AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep
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Total							
Indep	5						
Total	10						
Depend							
Total	15						
Claims							

		AMENDMENT		AMENDMENT		AMENDMENT	
	Indep.	Depend.	Indep	Depend	Indep	Depend	Indep
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